



Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Group Art Unit:: 2876
Suggested Classification:: 235/379
Title:: CASH DISPENSING AUTOMATED BANKING
MACHINE WITH ADJUSTABLE FASCIA BEZEL
Attorney Docket Number:: D-1221 R9
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 30
Total Drawing Sheets:: 97
Small Entity:: No
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: MX
Status:: Full Capacity
Given Name:: Pedro
Middle Name::
Family Name:: Tula
Name Suffix::
City of Residence:: North Canton
State or Province Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 1118 Lindylane Ave. SW
City of mailing address:: North Canton
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44720

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Dolar
Middle Name::	Harshadrai
Family Name::	Vaishnav
Name Suffix::	
City of Residence::	Brewster
State or Province Of Residence::	OH
Country of Residence::	US
Street of mailing address::	688 Muskingum Avenue NW
City of mailing address::	Brewster
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	44613

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jeff
Middle Name::
Family Name:: Young
Name Suffix::
City of Residence:: North Canton
State or Province Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 1171 Mount Pleasant NW
City of mailing address:: North Canton
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44720

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Dennis
Middle Name::	
Family Name::	Felt
Name Suffix::	
City of Residence::	Cambridge
State or Province Of Residence::	OH
Country of Residence::	US
Street of mailing address::	436 N. 12th Street
City of mailing address::	Cambridge
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	43725

Correspondence Information

Correspondence Customer Number:: 28995

Representative Information

Representative Customer Number:	28995
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Date Filing::
This Application	An application claiming the benefit under 35 USC 119(e)	60/453,667	03/10/2003

Assignee Information

Assignee Name:: Diebold Self-Service Systems
Division of Diebold, Incorporated
City of mailing address:: North Canton
State or Province of mailing address:: OH